

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

CHUBB GROUP OF INSURANCE CO
15 MOUNTAIN VIEW RD
PO BOX 1615
WARREN NJ 07061

2. Article Number

(Transfer from service label)

7011 0110 0001 3568 3605

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Wally McQuig

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

8/6/12

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☐ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

1

• **Sender:** Please print your name, address, and ZIP+4 in this box •

PENNY BERRY
STATE OF UTAH
DIVISION OF OIL GAS & MINING
PO BOX 145801
SALT LAKE CITY UT 84114-45801

RECEIVED

09 2012

DIV. OF OIL, GAS & MINING

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

PB 7/25/2012 50350044

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Authorization
for full release
of Bond #
Postmark
8196-17-64
xfer.

Total Postage

CHUBB GROUP OF INSURANCE CO
15 MOUNTAIN VIEW RD
PO BOX 1615
WARREN NJ 07061

Sent To
Street, Apt. # or PO Box No.
City, State, Z

5096 895E 1000 0110 1102